

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

FREEDOM'S DEFENSE FUND

ADDRESS (number and street)

PO BOX 96396

Check if different  
than previously  
reported. (ACC)

WASHINGTON

DC

20090

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00401786

3. IS THIS  
REPORTNEW  
(N)**OR**AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)(c) 12-Day  
**PRE**-Election  
Report for the:☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2010

through

03

31

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

SCOTT B MACKENZIE

Signature of Treasurer

Electronically Filed by SCOTT B MACKENZIE

Date

04

14

2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name  
FREEDOM'S DEFENSE FUND

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	21939.30
(b) Cash on Hand at Beginning of Reporting Period .....	21939.30	
(c) Total Receipts (from Line 19) .....	347357.03	347357.03
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	369296.33	369296.33
7. Total Disbursements (from Line 31) .....	340642.81	340642.81
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	28653.52	28653.52
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) .....	47448.32	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

FREEDOM'S DEFENSE FUND

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) .....	57143.96	57143.96
(ii) Unitemized .....	280980.87	280980.87
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	338124.83	338124.83
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	338124.83	338124.83
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	9232.20	9232.20
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	347357.03	347357.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	347357.03	347357.03

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	331542.81	331542.81	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	331542.81	331542.81	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	9000.00	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	100.00	100.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	100.00	100.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	340642.81	340642.81	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	340642.81	340642.81	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	338124.83	338124.83
34. Total Contribution Refunds (from Line 28(d)) .....	100.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	338024.83	338024.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	331542.81	331542.81
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	9232.20	9232.20
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	322310.61	322310.61

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)

MRS BERNYCE M ANDERSON 727

Mailing Address 4102 FAIRWAY DR

City

SPRINGDALE

State

AR

Zip Code

72764

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.86045

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

MRS BERNYCE M ANDERSON 727

Mailing Address 4102 FAIRWAY DR

City

SPRINGDALE

State

AR

Zip Code

72764

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.87045

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT B ARDIS 079

Mailing Address 25 YOUNG CT

City

CHESTER

State

NJ

Zip Code

07930

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.84334

Amount of Each Receipt this Period

105.00

**SUBTOTAL** of Receipts This Page (optional) .....

355.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**DR ARLO D BAGGERLEY 544**

Mailing Address **N10158 PARK LANE AVE**

City State Zip Code  
**LOYAL WI 54446**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**DOCTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**244.58**

Date of Receipt

**03 / 04 / 2010**

**Transaction ID: SA11AI.85185**

Amount of Each Receipt this Period

**81.89**

**B.**

Full Name (Last, First, Middle Initial)  
**DR ARLO D BAGGERLEY 544**

Mailing Address **N10158 PARK LANE AVE**

City State Zip Code  
**LOYAL WI 54446**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
**DOCTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**325.21**

Date of Receipt

**03 / 09 / 2010**

**Transaction ID: SA11AI.85561**

Amount of Each Receipt this Period

**80.63**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS BARBARA N BAUR 152**

Mailing Address **5307 WESTMINSTER PL**

City State Zip Code  
**PITTSBURGH PA 15232**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**03 / 10 / 2010**

**Transaction ID: SA11AI.85707**

Amount of Each Receipt this Period

**250.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**412.52**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MR RODNEY COLBURN BETTS 422**

Mailing Address **4519 LOGANSPOUR RD**

City State Zip Code  
**MORGANTOWN KY 42261**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**270.44**

Date of Receipt

**03 / 24 / 2010**

**Transaction ID: SA11AI.81739**

Amount of Each Receipt this Period

**150.44**

**B.**

Full Name (Last, First, Middle Initial)  
**MR KENNETH BLOOM 925**

Mailing Address **1487 SARONA CT**

City State Zip Code  
**SAN JACINTO CA 92583**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**210.00**

Date of Receipt

**01 / 19 / 2010**

**Transaction ID: SA11AI.77101**

Amount of Each Receipt this Period

**210.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR KENNETH BLOOM 925**

Mailing Address **1487 SARONA CT**

City State Zip Code  
**SAN JACINTO CA 92583**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**525.00**

Date of Receipt

**03 / 15 / 2010**

**Transaction ID: SA11AI.77614**

Amount of Each Receipt this Period

**315.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**675.44**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MS LOLA BOOTH 917**

Mailing Address **120 W SAN JOSE AVE UNIT 104**

City State Zip Code  
**CLAREMONT CA 91711**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**210.00**

Date of Receipt

**02 / 04 / 2010**

**Transaction ID: SA11AI.81990**

Amount of Each Receipt this Period

**210.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MS LOLA BOOTH 917**

Mailing Address **120 W SAN JOSE AVE UNIT 104**

City State Zip Code  
**CLAREMONT CA 91711**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**310.00**

Date of Receipt

**03 / 12 / 2010**

**Transaction ID: SA11AI.86231**

Amount of Each Receipt this Period

**100.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MS FUMIE BOYCE 985**

Mailing Address **4532 INTELCO LOOP SE APT 354**

City State Zip Code  
**LACEY WA 98503**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**03 / 23 / 2010**

**Transaction ID: SA11AI.88605**

Amount of Each Receipt this Period

**1000.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1310.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MR JOHN BRANDT 557**

Mailing Address **2129 12TH AVENUE E**

City State Zip Code  
**HIBBING MN 55746**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**210.00**

Date of Receipt

**01 / 12 / 2010**

Transaction ID: SA11AI.80038

Amount of Each Receipt this Period

**210.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR ROBERT BROWN 217**

Mailing Address **8384 DISCOVERY BLVD**

City State Zip Code  
**WALKERSVILLE MD 21793**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**-25.00**

Date of Receipt

**03 / 31 / 2010**

Transaction ID: SA11AI.88961

Amount of Each Receipt this Period

**-25.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MISS RUTH W BURKE 232**

Mailing Address **2541 STRATFORD RD**

City State Zip Code  
**RICHMOND VA 23225**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**350.00**

Date of Receipt

**02 / 19 / 2010**

Transaction ID: SA11AI.83835

Amount of Each Receipt this Period

**250.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**435.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)

MRS JOHN H BUTALA 339, JR

Mailing Address 14891 DAVID DR

City

FORT MYERS

State

FL

Zip Code

33908

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.86185

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MR R W CALLOWAY 752

Mailing Address 3811 TURTLE CREEK BLVD STE 400

City

DALLAS

State

TX

Zip Code

75219

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.86294

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

MR LOUIS T CAMILLERI 117

Mailing Address 1603 DEWEY AVE

City

NORTH BELLMORE

State

NY

Zip Code

11710

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.88670

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)

ERNEST CARTMILL 666

Mailing Address 6718 SW FAIRDALE DR

City

TOPEKA

State

KS

Zip Code

66619

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.85993

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

MR JACK E CAENEY 605

Mailing Address 546 DALEWOOD LN

City

HINSDALE

State

IL

Zip Code

60521

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PANDUIT CORP

Occupation

DIRECTOR OF TECHNOLOGY

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.83785

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

MS GERALDINE CLAUSEN 522

Mailing Address 4795 OAK CREST HILL RD SE

City

IOWA CITY

State

IA

Zip Code

52240

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.87833

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

5200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MR SOLOMON COOK 136**

Mailing Address **303 STATE ROUTE 37**

City State Zip Code  
**HOGANSBURG NY 13655**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1164.00**

Date of Receipt

**03 / 01 / 2010**

**Transaction ID: SA11AI.84375**

Amount of Each Receipt this Period

**1014.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MARGUERITE COOK 342**

Mailing Address **7810 KENNEDY LN**

City State Zip Code  
**SARASOTA FL 34240**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**497.00**

Date of Receipt

**03 / 02 / 2010**

**Transaction ID: SA11AI.84811**

Amount of Each Receipt this Period

**297.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS JUANITA COOKE 907**

Mailing Address **4319 IROQUOIS AVE**

City State Zip Code  
**LAKEWOOD CA 90713**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**225.00**

Date of Receipt

**02 / 02 / 2010**

**Transaction ID: SA11AI.81581**

Amount of Each Receipt this Period

**225.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1536.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS HELEN COX 331**

Mailing Address **753 MAJORCA AVE**

City State Zip Code  
**CORAL GABLES FL 33134**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**03 / 02 / 2010**

Transaction ID: SA11AI.84632

Amount of Each Receipt this Period

**150.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS MARJORIE DAVIS 043**

Mailing Address **6 HUCKLEBERRY LN**

City State Zip Code  
**AUGUSTA ME 04330**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**NOT EMPLOYED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**01 / 26 / 2010**

Transaction ID: SA11AI.81052

Amount of Each Receipt this Period

**500.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MISS ANNE C DEAVEN 402**

Mailing Address **3623 FERN VALLEY RD APT 209**

City State Zip Code  
**LOUISVILLE KY 40219**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**235.00**

Date of Receipt

**02 / 01 / 2010**

Transaction ID: SA11AI.81353

Amount of Each Receipt this Period

**200.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**850.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.**Full Name (Last, First, Middle Initial)  
MRS MARY E LAUGHLIN DEININGER 926

Mailing Address 417 VIA LIDO NORD

City	State	Zip Code
NEWPORT BEACH	CA	92663

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

Transaction ID: SA11AI.86538

Amount of Each Receipt this Period

100.00

**B.**Full Name (Last, First, Middle Initial)  
DR MICHAEL DELDIN 936, MD

Mailing Address 802 IOWA AVE

City	State	Zip Code
LOS BANOS	CA	93635

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
SELF EMPLOYEDOccupation  
PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

Transaction ID: SA11AI.87066

Amount of Each Receipt this Period

250.00

**C.**Full Name (Last, First, Middle Initial)  
MRS ARDEN DRUCE 863

Mailing Address 2537 N LA GRANDE DR E

City	State	Zip Code
CAMP VERDE	AZ	86322

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	8	/	2	0	1	0

Transaction ID: SA11AI.85444

Amount of Each Receipt this Period

106.00

SUBTOTAL of Receipts This Page (optional) .....

456.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.**Full Name (Last, First, Middle Initial)  
MRS ARDEN DRUCE 863

Mailing Address 2537 N LA GRANDE DR E

City	State	Zip Code
CAMP VERDE	AZ	86322

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	6	/	2	0	1	0

Transaction ID: SA11AI.87187

Amount of Each Receipt this Period

100.00

**B.**Full Name (Last, First, Middle Initial)  
MR MICHAEL FISCHER 850

Mailing Address 3037 N 50TH ST

City	State	Zip Code
PHOENIX	AZ	85018

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
SEQUOIA FINANCIAL ADVISORSOccupation  
FINANCIAL PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	1	/	2	0	1	0

Transaction ID: SA11AI.79450

Amount of Each Receipt this Period

250.00

**C.**Full Name (Last, First, Middle Initial)  
MR DONALD FORSHOT 331

Mailing Address 1240 NW 74TH ST

City	State	Zip Code
MIAMI	FL	33147

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
SECURE ALL OF FLORIDA INC.Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	0

Transaction ID: SA11AI.83402

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) .....

600.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)

MR DUANE L FOSS 925

Mailing Address 675 W OAKLAND AVE SPC D7

City

HEMET

State

CA

Zip Code

92543

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.81459

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MR DUANE L FOSS 925

Mailing Address 675 W OAKLAND AVE SPC D7

City

HEMET

State

CA

Zip Code

92543

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.85524

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)

MR CHET FOSSUM 588

Mailing Address 1906 19TH AVE W

City

WILLISTON

State

ND

Zip Code

58801

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.88111

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MR JERROLD GAMER 983**

Mailing Address **223 SCENIC VW**

City State Zip Code  
**PORT LUDLOW WA 98365**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**03 / 11 / 2010**

**Transaction ID: SA11AI.86009**

Amount of Each Receipt this Period

**500.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR JERROLD GAMER 983**

Mailing Address **223 SCENIC VW**

City State Zip Code  
**PORT LUDLOW WA 98365**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**700.00**

Date of Receipt

**03 / 24 / 2010**

**Transaction ID: SA11AI.81718**

Amount of Each Receipt this Period

**200.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MS CAROLYN J GARDNER 381**

Mailing Address **4415 WILDWOOD RD**

City State Zip Code  
**MEMPHIS TN 38135**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**237.00**

Date of Receipt

**03 / 11 / 2010**

**Transaction ID: SA11AI.85912**

Amount of Each Receipt this Period

**237.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**937.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MR ARNOLD GARRISON 024**

Mailing Address **181 PINE RIDGE RD**

City State Zip Code  
**WABAN MA 02468**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**03 / 11 / 2010**

**Transaction ID: SA11AI.86037**

Amount of Each Receipt this Period

**500.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MISS ELOISE D GAY 322**

Mailing Address **5809 CEDAR OAKS DR**

City State Zip Code  
**JACKSONVILLE FL 32210**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**03 / 15 / 2010**

**Transaction ID: SA11AI.86541**

Amount of Each Receipt this Period

**1000.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS DOLORES GHYSELINCK 936**

Mailing Address **40530 HIGHWAY 41**

City State Zip Code  
**OAKHURST CA 93644**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**MOTEL OWNER/OPERATOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**03 / 23 / 2010**

**Transaction ID: SA11AI.77823**

Amount of Each Receipt this Period

**150.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1650.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MS RUTH GLASS 546**

Mailing Address **101 N MAIBEN ST**

City State Zip Code  
**READSTOWN WI 54652**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**-15.00**

Date of Receipt

**03 / 31 / 2010**

Transaction ID: SA11AI.88966

Amount of Each Receipt this Period

**-35.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR HENRY W GOLDING 105**

Mailing Address **72 CHASE RD N**

City State Zip Code  
**SCARSDALE NY 10583**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**SELF EMPLOYED**

Occupation  
**CONSULTANT**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**03 / 01 / 2010**

Transaction ID: SA11AI.84374

Amount of Each Receipt this Period

**150.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR PHILIP GOLDRICH 100**

Mailing Address **19 STUYVESANT ST APT 4A**

City State Zip Code  
**NEW YORK NY 10003**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**216.00**

Date of Receipt

**03 / 24 / 2010**

Transaction ID: SA11AI.81785

Amount of Each Receipt this Period

**72.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**187.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

A.

Full Name (Last, First, Middle Initial)

MR HOWARD GORSUCH 991

Mailing Address 1059 MIDDLE BASIN RD

City

COLVILLE

State

WA

Zip Code

99114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.86407

Amount of Each Receipt this Period

200.00

B.

Full Name (Last, First, Middle Initial)

MR WILLIAM H GRIMES 857

Mailing Address 7500 N CALLE SIN ENVIDIA  
APT 2201

City

TUCSON

State

AZ

Zip Code

85718

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.87437

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

MS MARY J Y GULINO 220

Mailing Address 4200 OLD COLUMBIA PIKE

City

ANNANDALE

State

VA

Zip Code

22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.83458

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

450.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)

MS MARY J Y GULINO 220

Mailing Address 4200 OLD COLUMBIA PIKE

City

ANNANDALE

State

VA

Zip Code

22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.85089

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

MS MARY J Y GULINO 220

Mailing Address 4200 OLD COLUMBIA PIKE

City

ANNANDALE

State

VA

Zip Code

22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.85936

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

DONALD GUMPERTZ 916

Mailing Address PO BOX 2450

City

TOLUCA LAKE

State

CA

Zip Code

91610

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.77237

Amount of Each Receipt this Period

375.00

**SUBTOTAL** of Receipts This Page (optional) .....

725.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**DONALD GUMPERTZ 916**

Mailing Address **PO BOX 2450**

City State Zip Code  
**TOLUCA LAKE CA 91610**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**625.00**

Date of Receipt

**03 / 08 / 2010**

Transaction ID: SA11AI.77505

Amount of Each Receipt this Period

**250.00**

**B.**

Full Name (Last, First, Middle Initial)  
**DONALD GUMPERTZ 916**

Mailing Address **PO BOX 2450**

City State Zip Code  
**TOLUCA LAKE CA 91610**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**03 / 23 / 2010**

Transaction ID: SA11AI.77776

Amount of Each Receipt this Period

**375.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MARY ANDREWS HAAG 920**

Mailing Address **7171 COUNTRY CLUB DR**

City State Zip Code  
**LA JOLLA CA 92037**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**01 / 11 / 2010**

Transaction ID: SA11AI.79619

Amount of Each Receipt this Period

**250.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**875.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MR T HABECKER 986**

Mailing Address **111 SE 98TH AVE**

City State Zip Code  
**VANCOUVER WA 98664**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**03 / 15 / 2010**

**Transaction ID: SA11AI.86627**

Amount of Each Receipt this Period

**300.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR PAUL R HAMILTON 786**

Mailing Address **413 W CREEK ST**

City State Zip Code  
**FREDERICKSBURG TX 78624**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**03 / 16 / 2010**

**Transaction ID: SA11AI.87535**

Amount of Each Receipt this Period

**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR J KERN HAMILTON 950**

Mailing Address **800 BLOSSOM HILL RD UNIT E324**

City State Zip Code  
**LOS GATOS CA 95032**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**01 / 18 / 2010**

**Transaction ID: SA11AI.80660**

Amount of Each Receipt this Period

**300.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**850.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
 MR J KERN HAMILTON 950

Mailing Address 800 BLOSSOM HILL RD UNIT E324

City State Zip Code  
**LOS GATOS CA 95032**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 2 / 1 8 / 2 0 1 0**

Transaction ID: SA11AI.83649

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
 MR J KERN HAMILTON 950

Mailing Address 800 BLOSSOM HILL RD UNIT E324

City State Zip Code  
**LOS GATOS CA 95032**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 3 / 0 5 / 2 0 1 0**

Transaction ID: SA11AI.85260

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
 MR J KERN HAMILTON 950

Mailing Address 800 BLOSSOM HILL RD UNIT E324

City State Zip Code  
**LOS GATOS CA 95032**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
**0 3 / 1 5 / 2 0 1 0**

Transaction ID: SA11AI.86564

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MR RALPH HANDWERK 180**

Mailing Address **2717 NORTH LN**

City State Zip Code  
**OREFIELD PA 18069**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**400.00**

Date of Receipt

**03 / 16 / 2010**

**Transaction ID: SA11AI.87165**

Amount of Each Receipt this Period

**400.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS VIOLET HANNA 916**

Mailing Address **4123 MARY ELLEN AVE**

City State Zip Code  
**STUDIO CITY CA 91604**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**02 / 03 / 2010**

**Transaction ID: SA11AI.81851**

Amount of Each Receipt this Period

**500.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS BERTHA D HART 235**

Mailing Address **901E ARMFIELD CIR #104**

City State Zip Code  
**NORFOLK VA 23505**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1521.00**

Date of Receipt

**03 / 16 / 2010**

**Transaction ID: SA11AI.87734**

Amount of Each Receipt this Period

**1521.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**2421.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MR H RUSHTON HARWOOD 040, JR

Mailing Address 15 PIPER RD APT J219

City State Zip Code  
SCARBOROUGH ME 04074

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.77694

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
MISS SYLVIA HAUZENBLAS 042

Mailing Address PO BOX 38

City State Zip Code  
BRYANT POND ME 04219

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.87578

Amount of Each Receipt this Period

132.00

**C.**

Full Name (Last, First, Middle Initial)  
MR JAMES G HEATHER 952

Mailing Address 10095 CREEK TRAIL CIR

City State Zip Code  
STOCKTON CA 95209

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SELF EMPLOYED

Occupation  
CPA

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.82305

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

582.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS ELLA M HELM 300**

Mailing Address **3385 HALLMARK DR SE**

City State Zip Code  
**MARIETTA GA 30067**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**225.00**

Date of Receipt

**03 / 08 / 2010**

Transaction ID: SA11AI.77522

Amount of Each Receipt this Period

**150.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS ELLA M HELM 300**

Mailing Address **3385 HALLMARK DR SE**

City State Zip Code  
**MARIETTA GA 30067**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**03 / 11 / 2010**

Transaction ID: SA11AI.86036

Amount of Each Receipt this Period

**75.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MISS MARGARET L HELTON 206**

Mailing Address **3350 TWINBROOK DR**

City State Zip Code  
**WALDORF MD 20603**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**226.00**

Date of Receipt

**02 / 15 / 2010**

Transaction ID: SA11AI.83465

Amount of Each Receipt this Period

**226.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**451.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MR ROBERT B HENDRY 781**

Mailing Address **12900 E LOOP 1604 N APT 718**

City State Zip Code  
**UNIVERSAL CITY TX 78148**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**01 / 15 / 2010**

**Transaction ID: SA11AI.80495**

Amount of Each Receipt this Period

**250.00**

**B.**

Full Name (Last, First, Middle Initial)  
**CLIFFORD HERREN 737**

Mailing Address **1020 SANTA FE ST**

City State Zip Code  
**ALVA OK 73717**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**280.00**

Date of Receipt

**02 / 03 / 2010**

**Transaction ID: SA11AI.81878**

Amount of Each Receipt this Period

**140.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MS BECKY HILL 201**

Mailing Address **15008 ROLLING RIDGE RD**

City State Zip Code  
**HAYMARKET VA 20169**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**204.00**

Date of Receipt

**03 / 16 / 2010**

**Transaction ID: SA11AI.87449**

Amount of Each Receipt this Period

**75.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**465.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MS NEVENKA HOFFMAN 900**

Mailing Address **3938 W POINT DR**

City State Zip Code  
**LOS ANGELES CA 90065**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**237.00**

Date of Receipt

**01 / 07 / 2010**

Transaction ID: SA11AI.78432

Amount of Each Receipt this Period

**237.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MS NEVENKA HOFFMAN 900**

Mailing Address **3938 W POINT DR**

City State Zip Code  
**LOS ANGELES CA 90065**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**474.00**

Date of Receipt

**03 / 04 / 2010**

Transaction ID: SA11AI.85187

Amount of Each Receipt this Period

**237.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MS FLORENCE HOOTEN 207**

Mailing Address **7017 SAINT ANNES AVE**

City State Zip Code  
**LANHAM MD 20706**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**235.00**

Date of Receipt

**03 / 02 / 2010**

Transaction ID: SA11AI.84792

Amount of Each Receipt this Period

**75.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**549.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MS FLORENCE HOOTEN 207**

Mailing Address **7017 SAINT ANNES AVE**

City State Zip Code  
**LANHAM MD 20706**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**385.00**

Date of Receipt

**03 / 11 / 2010**

**Transaction ID: SA11AI.85924**

Amount of Each Receipt this Period

**150.00**

**B.**

Full Name (Last, First, Middle Initial)  
**KAYA KUBIK HUGHES 450**

Mailing Address **62 WOODROW ST**

City State Zip Code  
**ST CHARLES OH 45013**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**03 / 16 / 2010**

**Transaction ID: SA11AI.87681**

Amount of Each Receipt this Period

**500.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR PAUL E JACKSON 324**

Mailing Address **917 MARINA DR**

City State Zip Code  
**PANAMA CITY BEACH FL 32407**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**02 / 15 / 2010**

**Transaction ID: SA11AI.83340**

Amount of Each Receipt this Period

**200.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**850.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.**Full Name (Last, First, Middle Initial)  
MR RONALD W JACKSON 435

Mailing Address 5679 MONROE ST APT 1117

City	State	Zip Code
SYLVANIA	OH	43560

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	3	/	2	0	1	0

Transaction ID: SA11AI.85043

Amount of Each Receipt this Period

270.00

**B.**Full Name (Last, First, Middle Initial)  
MR RONALD W JACKSON 435

Mailing Address 5679 MONROE ST APT 1117

City	State	Zip Code
SYLVANIA	OH	43560

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	1	0

Transaction ID: SA11AI.85877

Amount of Each Receipt this Period

300.00

**C.**Full Name (Last, First, Middle Initial)  
MRS MARIAN JENSEN 841

Mailing Address 171 3RD AVE APT 612

City	State	Zip Code
SALT LAKE CITY	UT	84103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

Transaction ID: SA11AI.86571

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) .....

870.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)

MRS FRANCES JOHNSON 924

Mailing Address 3345 VALENCIA AVE

City

SAN BERNARDINO

State

CA

Zip Code

92404

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.88753

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

MRS MARY C JORDAN 628

Mailing Address 321 W SOUTH ST

City

GRAYVILLE

State

IL

Zip Code

62844

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.85113

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

MRS HILDA JUDD 931

Mailing Address PO BOX 50153

City

SANTA BARBARA

State

CA

Zip Code

93150

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.86836

Amount of Each Receipt this Period

315.00

**SUBTOTAL** of Receipts This Page (optional) .....

515.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MR WALTER H KLEINER 980**

Mailing Address **1725 89TH PL NE**

City State Zip Code  
**CLYDE HILL WA 98004**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**03 / 22 / 2010**

Transaction ID: SA11AI.88475

Amount of Each Receipt this Period

**500.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS BETTY KNIGHT 379**

Mailing Address **5201 CATALINA RD**

City State Zip Code  
**KNOXVILLE TN 37918**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**03 / 15 / 2010**

Transaction ID: SA11AI.86857

Amount of Each Receipt this Period

**60.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR HOMER R KNIGHT 656**

Mailing Address **305 S SPRUCE ST**

City State Zip Code  
**CONWAY MO 65632**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**03 / 15 / 2010**

Transaction ID: SA11AI.86999

Amount of Each Receipt this Period

**100.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**660.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)

MR ROBERT KRAMER 342

Mailing Address 1233 N GULFSTREAM AVE UNIT 140

City

SARASOTA

State

FL

Zip Code

34236

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.86258

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

MS OLIVE KUEFFER 945

Mailing Address 1931 E ST

City

HAYWARD

State

CA

Zip Code

94541

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.87610

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

DR FRANK KYSELA 441, DDS

Mailing Address 4406 ROCKY RIVER DR

City

CLEVELAND

State

OH

Zip Code

44135

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation

DENTIST

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.77266

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

425.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MS JANE LAIRD 198**

Mailing Address **4031 KENNETT PIKE**

City State Zip Code  
**GREENVILLE DE 19807**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**01 / 04 / 2010**

Transaction ID: SA11AI.77969

Amount of Each Receipt this Period

**250.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR DONALD LAU 945**

Mailing Address **3344 REDWING PL**

City State Zip Code  
**FREMONT CA 94555**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**447.00**

Date of Receipt

**03 / 16 / 2010**

Transaction ID: SA11AI.87643

Amount of Each Receipt this Period

**297.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR ROLLISTON W LINSKOTT 342, JR**

Mailing Address **3710 GULF OF MEXICO DR LOT C18**

City State Zip Code  
**LONGBOAT KEY FL 34228**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**450.00**

Date of Receipt

**03 / 12 / 2010**

Transaction ID: SA11AI.86328

Amount of Each Receipt this Period

**450.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**997.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS MAYSEL LOCKHART 644**

Mailing Address **413 N LOCUST ST**

City State Zip Code  
**STANBERRY MO 64489**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-25.00

Date of Receipt

**03 / 31 / 2010**

**Transaction ID: SA11AI.88959**

Amount of Each Receipt this Period

-25.00

**B.**

Full Name (Last, First, Middle Initial)  
**MR CHARLES W LOUFEK 554**

Mailing Address **6600 INTERLACHEN BLVD**

City State Zip Code  
**MINNEAPOLIS MN 55436**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

**01 / 11 / 2010**

**Transaction ID: SA11AI.79770**

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
**MR CHARLES W LOUFEK 554**

Mailing Address **6600 INTERLACHEN BLVD**

City State Zip Code  
**MINNEAPOLIS MN 55436**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**03 / 16 / 2010**

**Transaction ID: SA11AI.87758**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

**975.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS ESTHER LOVE 191**

Mailing Address **7816 FAIRFIELD ST**

City State Zip Code  
**PHILADELPHIA PA 19152**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**02 / 02 / 2010**

**Transaction ID: SA11AI.81620**

Amount of Each Receipt this Period

**150.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR JOHN C MACMURRAY 970**

Mailing Address **32370 SE JUDD RD**

City State Zip Code  
**EAGLE CREEK OR 97022**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**600.00**

Date of Receipt

**02 / 02 / 2010**

**Transaction ID: SA11AI.81604**

Amount of Each Receipt this Period

**400.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR ROBERT E MALONE 852**

Mailing Address **18721 E BUCKSKIN DR  
P O BOX 32063**

City State Zip Code  
**RIO VERDE AZ 85263**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**03 / 16 / 2010**

**Transaction ID: SA11AI.87433**

Amount of Each Receipt this Period

**300.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**850.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS ALICE MARTIN 245**

Mailing Address **149 SALISBURY CIR**

City State Zip Code  
**LYNCHBURG VA 24502**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**244.00**

Date of Receipt

**03 / 09 / 2010**

**Transaction ID: SA11AI.85535**

Amount of Each Receipt this Period

**100.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS MARGARET MCIVER 271**

Mailing Address **5400 COVENANT LN**

City State Zip Code  
**WINSTON SALEM NC 27106**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**03 / 16 / 2010**

**Transaction ID: SA11AI.87738**

Amount of Each Receipt this Period

**500.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS MARGARET MCIVER 271**

Mailing Address **5400 COVENANT LN**

City State Zip Code  
**WINSTON SALEM NC 27106**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**600.00**

Date of Receipt

**03 / 19 / 2010**

**Transaction ID: SA11AI.88107**

Amount of Each Receipt this Period

**100.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**700.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.**Full Name (Last, First, Middle Initial)  
MR THOMAS V MCNAMARA 490

Mailing Address 6910 N SPRINKLE RD

City	State	Zip Code
KALAMAZOO	MI	49004

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	1	0

Transaction ID: SA11AI.86579

Amount of Each Receipt this Period

300.00

**B.**Full Name (Last, First, Middle Initial)  
MISS MARY MELTZER 139

Mailing Address 14 EDGECOMB RD

City	State	Zip Code
BINGHAMTON	NY	13905

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	2	/	2	0	1	0

Transaction ID: SA11AI.88437

Amount of Each Receipt this Period

500.00

**C.**Full Name (Last, First, Middle Initial)  
MR ANDREW MESSENGER 335

Mailing Address 10634 MOSHIE LN

City	State	Zip Code
SAN ANTONIO	TX	33576

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	1	0

Transaction ID: SA11AI.85293

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) .....

1100.00

TOTAL This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.**Full Name (Last, First, Middle Initial)  
MR ANDREW MESSENGER 335

Mailing Address 10634 MOSHIE LN

City	State	Zip Code
SAN ANTONIO	TX	33576

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	1	0

Transaction ID: SA11AI.85870

Amount of Each Receipt this Period

400.00

**B.**Full Name (Last, First, Middle Initial)  
MR KENDALL C MILLER 936

Mailing Address 7350 WAKEFIELD AVE

City	State	Zip Code
REEDLEY	CA	93654

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KENCAROL INCOccupation  
FARM MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	4	/	2	0	1	0

Transaction ID: SA11AI.82053

Amount of Each Receipt this Period

250.00

**C.**Full Name (Last, First, Middle Initial)  
MR JOHN L MINTER 779

Mailing Address 116 SEASCAPE DR

City	State	Zip Code
PORT LAVACA	TX	77979

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	1	0

Transaction ID: SA11AI.80523

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)

MR JOHN L MINTER 779

Mailing Address 116 SEASCAPE DR

City

PORT LAVACA

State

TX

Zip Code

77979

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.87399

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

MS ANTOINETTE C MIRE 711

Mailing Address 301 WAYNE DR

City

SHREVEPORT

State

LA

Zip Code

71105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.85566

Amount of Each Receipt this Period

140.00

**C.**

Full Name (Last, First, Middle Initial)

SALINA MOONEY 945

Mailing Address 2333 CLEMENT AVE APT B

City

ALAMEDA

State

CA

Zip Code

94501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.86526

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

375.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS EVA MOORE 327**

Mailing Address **2 JADE ST**

City State Zip Code  
**EUSTIS FL 32726**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1100.00**

Date of Receipt

**03 / 12 / 2010**

**Transaction ID: SA11AI.86472**

Amount of Each Receipt this Period

**1000.00**

**B.**

Full Name (Last, First, Middle Initial)  
**IA MORRIS 144**

Mailing Address **2867 OUTLET RD**

City State Zip Code  
**CLIFTON SPRINGS NY 14432**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GW LISK CO INC**

Occupation  
**ENGINEER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**02 / 24 / 2010**

**Transaction ID: SA11AI.84107**

Amount of Each Receipt this Period

**500.00**

**C.**

Full Name (Last, First, Middle Initial)  
**IA MORRIS 144**

Mailing Address **2867 OUTLET RD**

City State Zip Code  
**CLIFTON SPRINGS NY 14432**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**GW LISK CO INC**

Occupation  
**ENGINEER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1500.00**

Date of Receipt

**03 / 26 / 2010**

**Transaction ID: SA11AI.88750**

Amount of Each Receipt this Period

**1000.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**2500.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS GERTIE MORRIS 760**

Mailing Address **307 SHADOW LN**

City State Zip Code  
**EULESS TX 76039**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**01 / 22 / 2010**

Transaction ID: SA11AI.80891

Amount of Each Receipt this Period

**300.00**

**B.**

Full Name (Last, First, Middle Initial)  
**CHERYL A MOSCATO 088**

Mailing Address **31 PATTON ST**

City State Zip Code  
**HIGH BRIDGE NJ 08829**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**230.00**

Date of Receipt

**03 / 16 / 2010**

Transaction ID: SA11AI.87457

Amount of Each Receipt this Period

**60.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MRS DOROTHY V NESBIT 349**

Mailing Address **437 SW KENTWOOD RD**

City State Zip Code  
**PORT SAINT LUCIE FL 34953**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**-35.00**

Date of Receipt

**03 / 31 / 2010**

Transaction ID: SA11AI.88965

Amount of Each Receipt this Period

**-35.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**325.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)

MR QUENTIN NESBITT 452

Mailing Address 9840 MONTGOMERY RD APT 2212

City

CINCINNATI

State

OH

Zip Code

45242

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	2	/	2	0	1	0

Transaction ID: SA11AI.77023

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

MS MARY NESBITT 511

Mailing Address 807 JENNINGS ST

City

SIOUX CITY

State

IA

Zip Code

51105

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	2	/	2	0	1	0

Transaction ID: SA11AI.84718

Amount of Each Receipt this Period

120.00

**C.**

Full Name (Last, First, Middle Initial)

MS DOROTHY M NICHOLSON 480

Mailing Address 2440 W 13 MILE RD

City

ROYAL OAK

State

MI

Zip Code

48073

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	1	0

Transaction ID: SA11AI.85974

Amount of Each Receipt this Period

132.00

SUBTOTAL of Receipts This Page (optional) .....

1252.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.**Full Name (Last, First, Middle Initial)  
MR ROBERT K NORMAN 150

Mailing Address 2318 BUTLER LOGAN RD

City	State	Zip Code
TARENTUM	PA	15084

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	1	/	2	0	1	0

Transaction ID: SA11AI.81239

Amount of Each Receipt this Period

250.00

**B.**Full Name (Last, First, Middle Initial)  
MR LARRY J O'NEIL 150

Mailing Address 358 ARGONNE DR

City	State	Zip Code
NEW KENSINGTON	PA	15068

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	7	/	2	0	1	0

Transaction ID: SA11AI.77161

Amount of Each Receipt this Period

300.00

**C.**Full Name (Last, First, Middle Initial)  
MR RAY P ODEN 711, JR

Mailing Address 702 THORA BLVD

City	State	Zip Code
SHREVEPORT	LA	71111

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	1	0

Transaction ID: SA11AI.78409

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional) .....

1050.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
ALIZA OPPENSTEIN 331

Mailing Address 2751 NE 183RD ST APT 514

City State Zip Code  
AVENTURA FL 33160

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NONE

Occupation  
HOMEMAKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.81612

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)  
MR JAMES L PARKS 730

Mailing Address PO BOX 30240

City State Zip Code  
EDMOND OK 73003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NONE

Occupation  
SELF EMPLOYED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.77498

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)  
MR EDWARD PERKINS 532

Mailing Address 3418 N 45TH ST

City State Zip Code  
MILWAUKEE WI 53225

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PIP PRINTING

Occupation  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 9 / 2 0 1 0

Transaction ID: SA11AI.85563

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)

MRS CHARLOTTE J PETERSON 331

Mailing Address 11193 NE 8TH CT

City

BISCAYNE PARK

State

FL

Zip Code

33161

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.87074

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)

MR PHILLIP S PETERSON 331

Mailing Address 11193 NE 8TH CT

City

BISCAYNE PARK

State

FL

Zip Code

33161

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.85092

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

C PETRUCCIONE 790

Mailing Address 1212 7TH AVE

City

CANYON

State

TX

Zip Code

79015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.77221

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

A.

Full Name (Last, First, Middle Initial)

C PETRUCCIONE 790

Mailing Address 1212 7TH AVE

City

CANYON

State

TX

Zip Code

79015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.86557

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

MR DALE E RAGEL 930

Mailing Address 1471 SORREL ST

City

SIMI VALLEY

State

CA

Zip Code

93065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.86048

Amount of Each Receipt this Period

316.00

C.

Full Name (Last, First, Middle Initial)

MR DALE E RAGEL 930

Mailing Address 1471 SORREL ST

City

SIMI VALLEY

State

CA

Zip Code

93065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.86049

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

466.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**ROSAL RAWLINSON 940**

Mailing Address **1479 FALLEN LEAF LN**

City State Zip Code  
**LOS ALTOS CA 94024**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**326.00**

Date of Receipt

**03 / 25 / 2010**

**Transaction ID: SA11AI.88700**

Amount of Each Receipt this Period

**176.00**

**B.**

Full Name (Last, First, Middle Initial)  
**VIRGINIA C REED 591**

Mailing Address **2966 PALM DR**

City State Zip Code  
**BILLINGS MT 59102**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOUSEWIFE**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**03 / 16 / 2010**

**Transaction ID: SA11AI.87595**

Amount of Each Receipt this Period

**200.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR NORMAN E REES 945**

Mailing Address **2406 HIGH POINTE CT**

City State Zip Code  
**FAIRFIELD CA 94534**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**215.00**

Date of Receipt

**03 / 31 / 2010**

**Transaction ID: SA11AI.88947**

Amount of Each Receipt this Period

**25.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**401.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MR MAURICE J REESE 537

Mailing Address 713 LAKEWOOD BLVD

City State Zip Code  
MADISON WI 53704

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 9 / 2 0 1 0

Transaction ID: SA11AI.88203

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
MR GEORGE P REMMENG 689

Mailing Address PO BOX 152

City State Zip Code  
CLAY CENTER NE 68933

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.82599

Amount of Each Receipt this Period

210.00

**C.**

Full Name (Last, First, Middle Initial)  
MR GEORGE P REMMENG 689

Mailing Address PO BOX 152

City State Zip Code  
CLAY CENTER NE 68933

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.84733

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

910.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MR GEORGE P REMMENG 689**

Mailing Address **PO BOX 152**

City State Zip Code  
**CLAY CENTER NE 68933**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**430.00**

Date of Receipt

**03 / 15 / 2010**

Transaction ID: SA11AI.86501

Amount of Each Receipt this Period

**20.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS ELLEN E REZABEK 683**

Mailing Address **1505 EVERGREEN AVE**

City State Zip Code  
**CRETE NE 68333**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**03 / 18 / 2010**

Transaction ID: SA11AI.87871

Amount of Each Receipt this Period

**100.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR LUNSFORD RICHARDSON 068, JR**

Mailing Address **7 INDIAN SPRING RD**

City State Zip Code  
**NORWALK CT 06853**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1500.00**

Date of Receipt

**01 / 07 / 2010**

Transaction ID: SA11AI.78753

Amount of Each Receipt this Period

**1500.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1620.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
 MISS JOAN M ROBERTS 581

Mailing Address 202 35TH AVE N APT 2

City State Zip Code  
**FARGO ND 58102**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.81624

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)  
 MISS JOAN M ROBERTS 581

Mailing Address 202 35TH AVE N APT 2

City State Zip Code  
**FARGO ND 58102**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.84690

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
 MR BENJAMIN F ROGERS 483, JR

Mailing Address 3941 LAKE OAKLAND SHORES DR

City State Zip Code  
**WATERFORD MI 48329**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.83881

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MR EDGAR E ROTHGEB 228**

Mailing Address **1920 BIG OAK RD**

City State Zip Code  
**LURAY VA 22835**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**400.00**

Date of Receipt

**02 / 01 / 2010**

**Transaction ID: SA11AI.81339**

Amount of Each Receipt this Period

**400.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR BURTON W ROUNDS 558**

Mailing Address **122 96TH AVE W**

City State Zip Code  
**DULUTH MN 55808**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**375.00**

Date of Receipt

**03 / 15 / 2010**

**Transaction ID: SA11AI.86570**

Amount of Each Receipt this Period

**225.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MS JANICE B RUBEL 331**

Mailing Address **2000 S BAYSHORE DR**

City State Zip Code  
**MIAMI FL 33133**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**INNISFREE, INC**

Occupation  
**IMPORT SPECIALIST**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**01 / 05 / 2010**

**Transaction ID: SA11AI.76944**

Amount of Each Receipt this Period

**300.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**925.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**DR WAYNE RYAN 681**

Mailing Address **1606 S 187TH CIR**

City State Zip Code  
**OMAHA NE 68130**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**STRECK LABORATORIES**

Occupation  
**DOCTOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**02 / 16 / 2010**

**Transaction ID: SA11AI.83574**

Amount of Each Receipt this Period

**250.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR JOHN RYERSON 922**

Mailing Address **202 S SANTA ROSA AVE**

City State Zip Code  
**EL CENTRO CA 92243**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**01 / 04 / 2010**

**Transaction ID: SA11AI.78023**

Amount of Each Receipt this Period

**500.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR EDWIN C SANDHAM 349**

Mailing Address **1964 SW SAINT ANDREWS DR**

City State Zip Code  
**PALM CITY FL 34990**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**350.00**

Date of Receipt

**01 / 19 / 2010**

**Transaction ID: SA11AI.80735**

Amount of Each Receipt this Period

**200.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**950.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
 MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code  
**PALM CITY FL 34990**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 5 / 2 0 1 0

Transaction ID: SA11AI.85219

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
 MR EDWIN C SANDHAM 349

Mailing Address 1964 SW SAINT ANDREWS DR

City State Zip Code  
**PALM CITY FL 34990**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 1 / 2 0 1 0

Transaction ID: SA11AI.85904

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)  
 MR HARM H SCHLOMER 990

Mailing Address PO BOX 340

City State Zip Code  
**MEDICAL LAKE WA 99022**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 NONE

Occupation  
 RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.86212

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**J S SELDEN 231, JR**

Mailing Address **PO BOX 1237**

City State Zip Code  
**WEST POINT VA 23181**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**400.00**

Date of Receipt

**03 / 16 / 2010**

**Transaction ID: SA11AI.87403**

Amount of Each Receipt this Period

**400.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR DAVID SENNET 605**

Mailing Address **4841 WOODLAND AVE**

City State Zip Code  
**WESTERN SPRINGS IL 60558**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**STRATEGIC SOLUTIONS**

Occupation  
**SYSTEMS MANAGER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**1000.00**

Date of Receipt

**01 / 05 / 2010**

**Transaction ID: SA11AI.78091**

Amount of Each Receipt this Period

**1000.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR JAMES J SHEA 922, JR**

Mailing Address **70168 SONORA RD**

City State Zip Code  
**RANCHO MIRAGE CA 92270**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**03 / 12 / 2010**

**Transaction ID: SA11AI.86289**

Amount of Each Receipt this Period

**300.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1700.00**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 95

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.**Full Name (Last, First, Middle Initial)  
MR JAMES SHERMAN 333

Mailing Address 4 TAHOE LN

City	State	Zip Code
SEA RANCH LAKES	FL	33308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYEDOccupation  
INVESTOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	1	0

Transaction ID: SA11AI.85135

Amount of Each Receipt this Period

700.00

**B.**Full Name (Last, First, Middle Initial)  
MRS GLYNDA D SMITH 731

Mailing Address 2408 NW 112TH TER

City	State	Zip Code
OKLAHOMA CITY	OK	73120

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	8	/	2	0	1	0

Transaction ID: SA11AI.87879

Amount of Each Receipt this Period

250.00

**C.**Full Name (Last, First, Middle Initial)  
EVADEAN L SMITH 922

Mailing Address 1052 PAUMA VALLEY RD

City	State	Zip Code
BANNING	CA	92220

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	1	0

Transaction ID: SA11AI.83290

Amount of Each Receipt this Period

360.00

SUBTOTAL of Receipts This Page (optional) .....

1310.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**EVADEAN L SMITH 922**

Mailing Address **1052 PAUMA VALLEY RD**

City State Zip Code  
**BANNING CA 92220**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**530.00**

Date of Receipt

**03 / 16 / 2010**

Transaction ID: SA11AI.77662

Amount of Each Receipt this Period

**70.00**

**B.**

Full Name (Last, First, Middle Initial)  
**R SOHN 333**

Mailing Address **9232 NW 9TH CT**

City State Zip Code  
**PLANTATION FL 33324**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**01 / 08 / 2010**

Transaction ID: SA11AI.79170

Amount of Each Receipt this Period

**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
**CHARLES E SPORCK 967**

Mailing Address **22 KAUMANA PL**

City State Zip Code  
**KAILUA HI 96734**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**300.00**

Date of Receipt

**02 / 15 / 2010**

Transaction ID: SA11AI.83378

Amount of Each Receipt this Period

**300.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**620.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MISS CHARLENE SPRANKEL 625**

Mailing Address **120 FENWAY DR**

City State Zip Code  
**DECATUR IL 62521**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**MATH PROFESSOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**750.00**

Date of Receipt

**01 / 11 / 2010**

Transaction ID: SA11AI.79602

Amount of Each Receipt this Period

**750.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MISS CHARLENE SPRANKEL 625**

Mailing Address **120 FENWAY DR**

City State Zip Code  
**DECATUR IL 62521**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**RETIRED**

Occupation  
**MATH PROFESSOR**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**850.00**

Date of Receipt

**02 / 15 / 2010**

Transaction ID: SA11AI.83306

Amount of Each Receipt this Period

**100.00**

**C.**

Full Name (Last, First, Middle Initial)  
**STEVEN STEFELY 601**

Mailing Address **941 S EUCLID AVE**

City State Zip Code  
**ELMHURST IL 60126**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**01 / 05 / 2010**

Transaction ID: SA11AI.76946

Amount of Each Receipt this Period

**250.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1100.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MR HARRY STOUT 479

Mailing Address 1142 CHERRY LN

City State Zip Code  
WEST LAFAYETTE IN 47906

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.87318

Amount of Each Receipt this Period

175.00

**B.**

Full Name (Last, First, Middle Initial)  
MRS JOHN STRASENBURG 082

Mailing Address PO BOX 608

City State Zip Code  
OCEAN VIEW NJ 08230

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 7 / 2 0 1 0

Transaction ID: SA11AI.77160

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS JOHN STRASENBURG 082

Mailing Address PO BOX 608

City State Zip Code  
OCEAN VIEW NJ 08230

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 1 0

Transaction ID: SA11AI.77263

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

675.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)

MISS YOLANDE STRAWINSKI 939

Mailing Address 1130 SYLVAN PL

City

MONTEREY

State

CA

Zip Code

93940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW YORK LIFE INS CO

Occupation  
AGENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.87875

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MISS CHLOE STUDWELL 068

Mailing Address PO BOX 5053

City

BROOKFIELD

State

CT

Zip Code

06804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.88912

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROBERT SUNDERLAND 890

Mailing Address 953 PYRITE AVE  
953 PYRITE AVE

City

HENDERSON

State

NV

Zip Code

89011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 2 / 2 0 1 0

Transaction ID: SA11AI.84736

Amount of Each Receipt this Period

230.00

**SUBTOTAL** of Receipts This Page (optional) .....

980.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MR ROBERT SUNDERLAND 890**

Mailing Address **953 PYRITE AVE**  
**953 PYRITE AVE**

City State Zip Code  
**HENDERSON NV 89011**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**555.00**

Date of Receipt

**03 / 12 / 2010**

**Transaction ID: SA11AI.86334**

Amount of Each Receipt this Period

**175.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MR ROBERT SUNDERLAND 890**

Mailing Address **953 PYRITE AVE**  
**953 PYRITE AVE**

City State Zip Code  
**HENDERSON NV 89011**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**605.00**

Date of Receipt

**03 / 22 / 2010**

**Transaction ID: SA11AI.88397**

Amount of Each Receipt this Period

**50.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR ROBERT SUNDERLAND 890**

Mailing Address **953 PYRITE AVE**  
**953 PYRITE AVE**

City State Zip Code  
**HENDERSON NV 89011**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**730.00**

Date of Receipt

**03 / 24 / 2010**

**Transaction ID: SA11AI.81757**

Amount of Each Receipt this Period

**125.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**350.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)

MR JOHN T SUNSTONE 206, JR

Mailing Address 2789 MORAN DR

City

WALDORF

State

MD

Zip Code

20601

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.80600

Amount of Each Receipt this Period

198.00

**B.**

Full Name (Last, First, Middle Initial)

MR JOHN T SUNSTONE 206, JR

Mailing Address 2789 MORAN DR

City

WALDORF

State

MD

Zip Code

20601

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 1 / 2 0 1 0

Transaction ID: SA11AI.81311

Amount of Each Receipt this Period

198.00

**C.**

Full Name (Last, First, Middle Initial)

MR DONALD SURGEON 940

Mailing Address PO BOX 1879

City

PACIFICA

State

CA

Zip Code

94044

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 6 / 2 0 1 0

Transaction ID: SA11AI.87563

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional) .....

546.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)

NSF DONOR UNIDENTIFIED

Mailing Address

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

-20.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.76937

Amount of Each Receipt this Period

-20.00

NSF CONTRIBUTION - UNIDENTIFIED

**B.**

Full Name (Last, First, Middle Initial)

MR ELMER WHITBECK 234

Mailing Address 420 LAVENDER LN

City

VIRGINIA BEACH

State

VA

Zip Code

23462

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
NONEOccupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.80878

Amount of Each Receipt this Period

375.00

**C.**

Full Name (Last, First, Middle Initial)

MR GEORGE WILLIAMS 226

Mailing Address 85 SHADY LN

City

STRASBURG

State

VA

Zip Code

22657

FEC ID number of contributing  
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 3 / 2 0 1 0

Transaction ID: SA11AI.85040

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional) .....

415.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
MR GEORGE WILLIAMS 226

Mailing Address 85 SHADY LN

City State Zip Code  
STRASBURG VA 22657

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 2 / 2 0 1 0

Transaction ID: SA11AI.86181

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)  
MR GEORGE WILLIAMS 226

Mailing Address 85 SHADY LN

City State Zip Code  
STRASBURG VA 22657

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 1 0

Transaction ID: SA11AI.81735

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
MRS JUNE WILLIAMS 927

Mailing Address 11300 WARNER AVE APT D101

City State Zip Code  
FOUNTAIN VALLEY CA 92708

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.87830

Amount of Each Receipt this Period

160.00

**SUBTOTAL** of Receipts This Page (optional) .....

360.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS SARAH B WILSON 142**

Mailing Address **715 RENAISSANCE DR APT 205**

City State Zip Code  
**WILLIAMSVILLE NY 14221**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**01 / 07 / 2010**

**Transaction ID: SA11AI.78398**

Amount of Each Receipt this Period

**500.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS SARAH B WILSON 142**

Mailing Address **715 RENAISSANCE DR APT 205**

City State Zip Code  
**WILLIAMSVILLE NY 14221**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**700.00**

Date of Receipt

**02 / 01 / 2010**

**Transaction ID: SA11AI.81301**

Amount of Each Receipt this Period

**200.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MR EARL S WILSON 339, JR**

Mailing Address **4510 N KEY DR APT 204**

City State Zip Code  
**NORTH FORT MYERS FL 33903**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**03 / 11 / 2010**

**Transaction ID: SA11AI.85872**

Amount of Each Receipt this Period

**300.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1000.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 95

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)  
**FREEDOM'S DEFENSE FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**MRS BARBARA H WILSON 941**

Mailing Address **2540 GREEN ST**

City State Zip Code  
**SAN FRANCISCO CA 94123**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**250.00**

Date of Receipt

**01 / 12 / 2010**

Transaction ID: SA11AI.77005

Amount of Each Receipt this Period

**250.00**

**B.**

Full Name (Last, First, Middle Initial)  
**MRS BARBARA H WILSON 941**

Mailing Address **2540 GREEN ST**

City State Zip Code  
**SAN FRANCISCO CA 94123**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**02 / 18 / 2010**

Transaction ID: SA11AI.77353

Amount of Each Receipt this Period

**250.00**

**C.**

Full Name (Last, First, Middle Initial)  
**MISS ELIZABETH WISKEMANN 949**

Mailing Address **357 HIGHLAND AVE**

City State Zip Code  
**SAN RAFAEL CA 94901**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

**500.00**

Date of Receipt

**03 / 23 / 2010**

Transaction ID: SA11AI.88643

Amount of Each Receipt this Period

**500.00**

**SUBTOTAL** of Receipts This Page (optional) .....

**1000.00**

**TOTAL** This Period (last page this line number only) .....

**57143.96**

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 95

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

FREEDOM'S DEFENSE FUND

**A.**Full Name (Last, First, Middle Initial)  
LEGACY LISTS, INC.Mailing Address 1155 15TH STREET, NW  
SUITE 410

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9232.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	7		2	0	1	0

Transaction ID: SA15.88992

Amount of Each Receipt this Period

9232.20

REFUND OF LIST COSTS

SUBTOTAL of Receipts This Page (optional) .....

9232.20

TOTAL This Period (last page this line number only) .....

9232.20

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) AVALANCHE SERVICES	<b>Transaction ID:</b> SB21B.76863 <b>Date of Disbursement</b>																				
Mailing Address 53 MCGARRY BLVD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	1		2	0	1	0												
City KEARNEYSVILLE State WV Zip Code 25430	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement DIRECT MAIL - PRINTING	<table border="1"> <tr> <td colspan="10">4522.50</td> </tr> </table>	4522.50																			
4522.50																					
Candidate Name FREEDOM'S DEFENSE FUND	<table border="1"> <tr> <td>003</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	003	Category/ Type																		
003																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:																					
<b>B.</b> Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE	<b>Transaction ID:</b> SB21B.76866 <b>Date of Disbursement</b>																				
Mailing Address 1155 15TH STREET, NW SUITE 410	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	1		2	0	1	0												
City WASHINGTON State DC Zip Code 20005	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement DIRECT MAIL FUNDRAISING	<table border="1"> <tr> <td colspan="10">15121.70</td> </tr> </table>	15121.70																			
15121.70																					
Candidate Name FREEDOM'S DEFENSE FUND	<table border="1"> <tr> <td>003</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	003	Category/ Type																		
003																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:																					
<b>C.</b> Full Name (Last, First, Middle Initial) CENTURY DATA MAILING SERVICE	<b>Transaction ID:</b> SB21B.76883 <b>Date of Disbursement</b>																				
Mailing Address 1155 15TH STREET, NW SUITE 410	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	4		2	0	1	0												
City WASHINGTON State DC Zip Code 20005	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement DIRECT MAIL FUNDRAISING	<table border="1"> <tr> <td colspan="10">8300.91</td> </tr> </table>	8300.91																			
8300.91																					
Candidate Name FREEDOM'S DEFENSE FUND	<table border="1"> <tr> <td>003</td> </tr> <tr> <td>Category/ Type</td> </tr> </table>	003	Category/ Type																		
003																					
Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:																					

**SUBTOTAL** of Disbursements This Page (optional) .....

27945.11

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 71 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICE

Mailing Address 1155 15TH STREET, NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING

Candidate Name  
FREEDOM'S DEFENSE FUND

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB21B.76884

Date of Disbursement

02 / 04 / 2010

Amount of Each Disbursement this Period

11537.18

**B.**

Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICE

Mailing Address 1155 15TH STREET, NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING

Candidate Name  
FREEDOM'S DEFENSE FUND

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB21B.76885

Date of Disbursement

02 / 17 / 2010

Amount of Each Disbursement this Period

22316.27

**C.**

Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICE

Mailing Address 1155 15TH STREET, NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL FUNDRAISING

Candidate Name  
FREEDOM'S DEFENSE FUND

003  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB21B.76903

Date of Disbursement

03 / 19 / 2010

Amount of Each Disbursement this Period

53748.66

**SUBTOTAL** of Disbursements This Page (optional) .....

87602.11

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.** Full Name (Last, First, Middle Initial)  
CENTURY DATA MAILING SERVICEMailing Address 1155 15TH STREET, NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
DIRECT MAIL FUNDRAISINGCandidate Name  
FREEDOM'S DEFENSE FUNDOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.76902

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	0

Amount of Each Disbursement this Period

9782.45

**B.** Full Name (Last, First, Middle Initial)  
COLORTREE, INC. OF VIRGINIA

Mailing Address 2519 BRITTONS HILL RD

City RICHMOND State VA Zip Code 23230

Purpose of Disbursement  
DIRECT MAIL - PRINTINGCandidate Name  
FREEDOM'S DEFENSE FUNDOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.76868

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	2		2	0	1	0

Amount of Each Disbursement this Period

5176.00

**C.** Full Name (Last, First, Middle Initial)  
COLORTREE, INC. OF VIRGINIA

Mailing Address 2519 BRITTONS HILL RD

City RICHMOND State VA Zip Code 23230

Purpose of Disbursement  
DIRECT MAIL - PRINTINGCandidate Name  
FREEDOM'S DEFENSE FUNDOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.76904

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	0

Amount of Each Disbursement this Period

2414.25

SUBTOTAL of Disbursements This Page (optional) .....

17372.70

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) <b>CONSERVATIVE POLITICAL ACTION CONFERENCE</b>	<b>Transaction ID:</b> SB21B.76889 <b>Date of Disbursement</b>																				
<b>Mailing Address</b> 1007 CAMERON STREET	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	4		2	0	1	0												
<b>City</b> ALEXANDRIA <b>State</b> VA <b>Zip Code</b> 22314	<b>Amount of Each Disbursement this Period</b>																				
<b>Purpose of Disbursement</b> CPAC 2010 SPONSORSHIP	<table border="1"> <tr> <td colspan="10">3000.00</td> </tr> </table>	3000.00																			
3000.00																					
<b>Candidate Name</b> FREEDOM'S DEFENSE FUND	<table border="1"> <tr> <td>007</td> </tr> </table> <b>Category/Type</b>	007																			
007																					
<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <b>State:</b> <b>District:</b>	<b>Disbursement For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) <b>CONSERVATIVE POLITICAL ACTION CONFERENCE</b>	<b>Transaction ID:</b> SB21B.76908 <b>Date of Disbursement</b>																				
<b>Mailing Address</b> 1007 CAMERON STREET	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	1		2	0	1	0												
<b>City</b> ALEXANDRIA <b>State</b> VA <b>Zip Code</b> 22314	<b>Amount of Each Disbursement this Period</b>																				
<b>Purpose of Disbursement</b> CPAC 2010 SPONSORSHIP	<table border="1"> <tr> <td colspan="10">3500.00</td> </tr> </table>	3500.00																			
3500.00																					
<b>Candidate Name</b> FREEDOM'S DEFENSE FUND	<table border="1"> <tr> <td>007</td> </tr> </table> <b>Category/Type</b>	007																			
007																					
<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <b>State:</b> <b>District:</b>	<b>Disbursement For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) <b>CONSOLIDATED MAILING SERVICES</b>	<b>Transaction ID:</b> SB21B.76869 <b>Date of Disbursement</b>																				
<b>Mailing Address</b> 504 SHAW RD SUITE 206	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	2		2	0	1	0												
<b>City</b> STERLING <b>State</b> VA <b>Zip Code</b> 20166	<b>Amount of Each Disbursement this Period</b>																				
<b>Purpose of Disbursement</b> DIRECT MAIL - PRINTING	<table border="1"> <tr> <td colspan="10">3500.00</td> </tr> </table>	3500.00																			
3500.00																					
<b>Candidate Name</b> FREEDOM'S DEFENSE FUND	<table border="1"> <tr> <td>003</td> </tr> </table> <b>Category/Type</b>	003																			
003																					
<b>Office Sought:</b> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <b>State:</b> <b>District:</b>	<b>Disbursement For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW RD  
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL - PRINTING

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.76870

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4000.00

**B.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW RD  
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL - PRINTING

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.76886

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8781.00

**C.** Full Name (Last, First, Middle Initial)  
CONSOLIDATED MAILING SERVICES

Mailing Address 504 SHAW RD  
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement  
DIRECT MAIL - PRINTING

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.76905

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7388.82

**SUBTOTAL** of Disbursements This Page (optional) .....

20169.82

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 75 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICES</p> <p>Mailing Address 504 SHAW RD SUITE 206</p> <p>City STERLING State VA Zip Code 20166</p> <p>Purpose of Disbursement DIRECT MAIL - PRINTING</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.76906</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 15042.60</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) CONSOLIDATED MAILING SERVICES</p> <p>Mailing Address 504 SHAW RD SUITE 206</p> <p>City STERLING State VA Zip Code 20166</p> <p>Purpose of Disbursement DIRECT MAIL - PRINTING</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.76907</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 10824.41</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) JEROME CORSI</p> <p>Mailing Address 16 BRANDYWINE DR.</p> <p>City BELCHERTOWN State MA Zip Code 01007</p> <p>Purpose of Disbursement CONSULTING - FUNDRAISING</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.88973</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 2000.00</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

27867.01

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 76 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.**Full Name (Last, First, Middle Initial)  
ROBERT DUBIEL

Mailing Address 43647 GLEN CASTLE COURT

City ASHBURN State VA Zip Code 20147

Purpose of Disbursement  
REIMBURSEMENT - CPAC RECEPTIONCandidate Name  
FREEDOM'S DEFENSE FUNDOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.76920

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	1	/	2	0	1	0

Amount of Each Disbursement this Period

4251.90

**B.**Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANKMailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGECandidate Name  
FREEDOM'S DEFENSE FUNDOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.76871

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	5	/	2	0	1	0

Amount of Each Disbursement this Period

366.23

**C.**Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANKMailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
CHECK ORDER CHARGECandidate Name  
FREEDOM'S DEFENSE FUNDOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.88969

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	9	/	2	0	1	0

Amount of Each Disbursement this Period

199.00

SUBTOTAL of Disbursements This Page (optional) .....

4817.13

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 77 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
AMEX COLLECTION FEE

Candidate Name  
FREEDOM'S DEFENSE FUND

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB21B.76872

Date of Disbursement

01 / 27 / 2010

Amount of Each Disbursement this Period

4.95

**B.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
NET SERVICE CHARGE

Candidate Name  
FREEDOM'S DEFENSE FUND

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB21B.76873

Date of Disbursement

01 / 29 / 2010

Amount of Each Disbursement this Period

250.79

**C.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
AMEX DISCOUNT FEE

Candidate Name  
FREEDOM'S DEFENSE FUND

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB21B.76874

Date of Disbursement

01 / 31 / 2010

Amount of Each Disbursement this Period

37.28

**SUBTOTAL** of Disbursements This Page (optional) .....

293.02

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 78 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGE

Candidate Name  
FREEDOM'S DEFENSE FUND

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB21B.76890

Date of Disbursement

02 / 02 / 2010

Amount of Each Disbursement this Period

250.19

**B.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGE

Candidate Name  
FREEDOM'S DEFENSE FUND

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB21B.88970

Date of Disbursement

02 / 02 / 2010

Amount of Each Disbursement this Period

30.81

**C.** Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
NET SERVICE CHARGE

Candidate Name  
FREEDOM'S DEFENSE FUND

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB21B.76891

Date of Disbursement

02 / 26 / 2010

Amount of Each Disbursement this Period

238.02

**SUBTOTAL** of Disbursements This Page (optional) .....

519.02

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 79 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
AMEX DISCOUNT FEE

Candidate Name  
FREEDOM'S DEFENSE FUND

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB21B.76892

Date of Disbursement

02 / 28 / 2010

Amount of Each Disbursement this Period

57.03

**B.**

Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
CREDIT CARD HOLDBACK

Candidate Name  
FREEDOM'S DEFENSE FUND

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB21B.88972

Date of Disbursement

03 / 01 / 2010

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGE

Candidate Name  
FREEDOM'S DEFENSE FUND

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼  
State: District:

Transaction ID: SB21B.76909

Date of Disbursement

03 / 02 / 2010

Amount of Each Disbursement this Period

287.89

**SUBTOTAL** of Disbursements This Page (optional) .....

1344.92

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 80 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
MERCHANT SERVICE CHARGE

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.88971

Date of Disbursement

/   /

Amount of Each Disbursement this Period

39.29

**B.**

Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
AMEX COLLECTION FEE

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.76914

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4.95

**C.**

Full Name (Last, First, Middle Initial)  
FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS DR  
SUITE 240

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
AMEX COLLECTION FEE

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.76910

Date of Disbursement

/   /

Amount of Each Disbursement this Period

38.00

**SUBTOTAL** of Disbursements This Page (optional) .....

82.24

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 81 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX COLLECTION FEE</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.76911</p> <p><b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 9 / 2 0 1 0</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div> <div></div> <div>4.95</div> </div> </p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement NET SERVICE CHARGE</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.76912</p> <p><b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 1 0</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div> <div></div> <div>447.49</div> </div> </p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) FIRST VIRGINIA COMMUNITY BANK</p> <p>Mailing Address 11325 RANDOM HILLS DR SUITE 240</p> <p>City FAIRFAX State VA Zip Code 22030</p> <p>Purpose of Disbursement AMEX DISCOUNT FEE</p> <p>Candidate Name FREEDOM'S DEFENSE FUND</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.76913</p> <p><b>Date of Disbursement</b>  <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 1 0</div> </div> </p> <p><b>Amount of Each Disbursement this Period</b>  <div> <div></div> <div>98.12</div> </div> </p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**550.56**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 82 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement  
DIRECT MAIL - PRINTING

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.76916

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6131.67

**B.**

Full Name (Last, First, Middle Initial)  
INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement  
DIRECT MAIL - PRINTING

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.76917

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8537.11

**C.**

Full Name (Last, First, Middle Initial)  
LEGACY LISTS, INC.

Mailing Address 1155 15TH STREET, NW  
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
LIST RENTALS

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.76918

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4382.20

**SUBTOTAL** of Disbursements This Page (optional) .....

19050.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

<b>A.</b> Full Name (Last, First, Middle Initial) PATTON-KIEHL GROUP, INC.	<b>Transaction ID:</b> SB21B.76875 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 590	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	2		2	0	1	0												
City THORNBURG State VA Zip Code 22565	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement DIRECT MAIL - MAILSHOP	<table border="1"> <tr> <td colspan="10">22987.72</td> </tr> </table>	22987.72																			
22987.72																					
Candidate Name FREEDOM'S DEFENSE FUND	<table border="1"> <tr> <td>003</td> </tr> </table> Category/ Type	003																			
003																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) PATTON-KIEHL GROUP, INC.	<b>Transaction ID:</b> SB21B.76876 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 590	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	1		2	0	1	0												
City THORNBURG State VA Zip Code 22565	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement DIRECT MAIL - MAILSHOP	<table border="1"> <tr> <td colspan="10">2922.50</td> </tr> </table>	2922.50																			
2922.50																					
Candidate Name FREEDOM'S DEFENSE FUND	<table border="1"> <tr> <td>003</td> </tr> </table> Category/ Type	003																			
003																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) PATTON-KIEHL GROUP, INC.	<b>Transaction ID:</b> SB21B.76895 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 590	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	4		2	0	1	0												
City THORNBURG State VA Zip Code 22565	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement DIRECT MAIL - MAILSHOP	<table border="1"> <tr> <td colspan="10">5988.17</td> </tr> </table>	5988.17																			
5988.17																					
Candidate Name FREEDOM'S DEFENSE FUND	<table border="1"> <tr> <td>003</td> </tr> </table> Category/ Type	003																			
003																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**31898.39**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 84 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
PATTON-KIEHL GROUP, INC.

Mailing Address PO BOX 590

City THORNBURG State VA Zip Code 22565

Purpose of Disbursement  
DIRECT MAIL - MAILSHOP

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.76919

Date of Disbursement

/

Amount of Each Disbursement this Period

714.15

**B.**

Full Name (Last, First, Middle Initial)  
PRINT EXPRESS

Mailing Address 1100 14TH STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
FDF BANNER FOR CPAC

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.88974

Date of Disbursement

/

Amount of Each Disbursement this Period

385.84

**C.**

Full Name (Last, First, Middle Initial)  
RED CAP STRATEGY INC

Mailing Address 510 FIRST AVE N  
SUITE 650

City MINNEAPOLIS State MN Zip Code 55403

Purpose of Disbursement  
CONSULTING - MEDIA & WEBSITE

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.76877

Date of Disbursement

/

Amount of Each Disbursement this Period

8000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

9099.99

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 85 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

A.

Full Name (Last, First, Middle Initial)  
SIMON & SCHUSTERMailing Address 1230 AVENUE OF THE AMERICAS  
11TH FLOOR

City NEW YORK State NY Zip Code 10020

Purpose of Disbursement  
BOOKS FOR FULFILMENTCandidate Name  
FREEDOM'S DEFENSE FUNDOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.76897

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	1	0

Amount of Each Disbursement this Period

14280.25

B.

Full Name (Last, First, Middle Initial)  
US POSTMASTERMailing Address 1400 L STREET, NW  
LBBY 2

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
BRM DEPOSITCandidate Name  
FREEDOM'S DEFENSE FUNDOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.76922

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	1	0

Amount of Each Disbursement this Period

6000.00

C.

Full Name (Last, First, Middle Initial)  
US POSTMASTERMailing Address 1400 L STREET, NW  
LBBY 2

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
BRM DEPOSITCandidate Name  
FREEDOM'S DEFENSE FUNDOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.76923

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	9		2	0	1	0

Amount of Each Disbursement this Period

7000.00

SUBTOTAL of Disbursements This Page (optional) .....

27280.25

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
US POSTMASTER

Mailing Address 1400 L STREET, NW  
LBBY 2

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
BRM DEPOSIT

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.76924

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
CAGING & ESCROW SERVICES

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.76880

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4629.68

**C.**

Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
CAGING & ESCROW SERVICES

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.76898

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2437.46

**SUBTOTAL** of Disbursements This Page (optional) .....

12067.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 87 / 95

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.** Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
PO BOX RENEWAL

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.76899

Date of Disbursement

/   /

Amount of Each Disbursement this Period

43.33

**B.** Full Name (Last, First, Middle Initial)  
WASHINGTON INTELLIGENCE BUREAU

Mailing Address 4128 PEPSI PLACE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
CAGING & ESCROW SERVICES

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.76925

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2127.40

**C.** Full Name (Last, First, Middle Initial)  
WEST END PRINTING CO.

Mailing Address 1609 SHERWOOD AVE

City RICHMOND State VA Zip Code 23220

Purpose of Disbursement  
DIRECT MAIL - PRINTING

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.76882

Date of Disbursement

/   /

Amount of Each Disbursement this Period

17629.50

**SUBTOTAL** of Disbursements This Page (optional) .....

19800.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

**A.**

Full Name (Last, First, Middle Initial)  
ZOGBY INTERNATIONAL

Mailing Address 901 BROAD STREET

City State Zip Code  
UTICA NY 13501

Purpose of Disbursement  
INTERNAL POLLING

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.76900

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12000.00

**B.**

Full Name (Last, First, Middle Initial)  
ZOGBY INTERNATIONAL

Mailing Address 901 BROAD STREET

City State Zip Code  
UTICA NY 13501

Purpose of Disbursement  
INTERNAL POLLING

Candidate Name  
FREEDOM'S DEFENSE FUND

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.76901

Date of Disbursement

/   /

Amount of Each Disbursement this Period

800.00

**SUBTOTAL** of Disbursements This Page (optional) .....

12800.00

**TOTAL** This Period (last page this line number only) .....

330560.62



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.** Full Name (Last, First, Middle Initial)  
DAVE EVANS FOR CONGRESS

Mailing Address PO BOX 2

City WARTRACE State TN Zip Code 37183

Purpose of Disbursement  
POLITICAL CONTRIBUTIONCandidate Name  
DAVE EVANSOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 06

Transaction ID: SB23.88985

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	0

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
DIGGS BROWN FOR CONGRESSMailing Address 125 S HOWES ST  
SUITE 1001

City FORT COLLINS State CO Zip Code 80521

Purpose of Disbursement  
POLITICAL CONTRIBUTIONCandidate Name  
DIGGS BROWNOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO District: 04

Transaction ID: SB23.88982

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	1	0

Amount of Each Disbursement this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
FRANK SCATURRO FOR CONGRESSMailing Address 515 HERRICKS ROAD  
SUITE 4

City NEW HYDE PARK State NY Zip Code 11040

Purpose of Disbursement  
POLITICAL CONTRIBUTIONCandidate Name  
FRANK SCATURROOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 04

Transaction ID: SB23.88990

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	8		2	0	1	0

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF CHRISTINE O'DONNELL

Mailing Address PO BOX 3987

City WILMINGTON State DE Zip Code 19807

Purpose of Disbursement  
POLITICAL CONTRIBUTIONCandidate Name  
CHRISTINE O'DONNELLOffice Sought: ☐ House  
☒ Senate  
☐ President

State: DE District: 00

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.88976

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	1	0

Amount of Each Disbursement this Period

1000.00
---------

**B.** Full Name (Last, First, Middle Initial)  
JAY RIEMERSMA FOR CONGRESS

Mailing Address PO BOX 1467

City HOLLAND State MI Zip Code 49422

Purpose of Disbursement  
POLITICAL CONTRIBUTIONCandidate Name  
ALLEN JAY RIEMERSMAOffice Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 02

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.88986

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	1	0

Amount of Each Disbursement this Period

2500.00
---------

**C.** Full Name (Last, First, Middle Initial)  
LES PHILLIP FOR CONGRESS

Mailing Address 12060 COUNTYLINE ROAD STE J 277

City MADISON State AL Zip Code 35756

Purpose of Disbursement  
POLITICAL CONTRIBUTIONCandidate Name  
LESTER S PHILLIPOffice Sought: ☒ House  
☐ Senate  
☐ President

State: AL District: 05

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.76928

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	7		2	0	1	0

Amount of Each Disbursement this Period

2000.00
---------

SUBTOTAL of Disbursements This Page (optional) .....

5500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND

A.

Full Name (Last, First, Middle Initial)  
WASINGER FOR CONGRESS

Mailing Address 2412 Pershing Drive  
PO BOX 1320

City Hays State KS Zip Code 67601

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name  
ROBERT K WASINGER

Office Sought: ☒ House  
☐ Senate  
☐ President

State: KS District: 01

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.88987

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	1	0

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

9000.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 92 / 95

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
AVALANCHE SERVICESNature of Debt (Purpose):  
DIRECT MAIL - PRINTING

Mailing Address 53 MCGARRY BLVD

City State ZIP Code  
KEARNEYSVILLE WV 25430

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.76862

Amount Incurred This Period

4522.50

Payment This Period

4522.50

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
BASE CONNECT, INCNature of Debt (Purpose):  
DIRECT MAIL - CREATIVEMailing Address 1155 15TH STREET, NW  
SUITE 410City State ZIP Code  
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

15494.30

Transaction ID: SD10.44275

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15494.30

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
BASE CONNECT, INCNature of Debt (Purpose):  
DIRECT MAIL - CREATIVEMailing Address 1155 15TH STREET, NW  
SUITE 410City State ZIP Code  
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

28361.61

Transaction ID: SD10.4112

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

28361.61

1) **SUBTOTALS** This Period This Page (optional).....

43855.91

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 93 / 95

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
CATTERTON PRINTINGNature of Debt (Purpose):  
DIRECT MAIL - PRINTING

Mailing Address 100 POST OFFICE RD

City State ZIP Code  
WALDORF MD 20602

Outstanding Balance Beginning This Period

1299.00

Transaction ID: SD10.4126

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1299.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
CENTURY DATA MAILING SERVICENature of Debt (Purpose):  
DIRECT MAIL FUNDRAISINGMailing Address 1155 15TH STREET, NW  
SUITE 410City State ZIP Code  
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.76865

Amount Incurred This Period

120807.17

Payment This Period

120807.17

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
COLORTREE, INC. OF VIRGINIANature of Debt (Purpose):  
DIRECT MAIL - PRINTING

Mailing Address 2519 BRITTONS HILL RD

City State ZIP Code  
RICHMOND VA 23230

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.76867

Amount Incurred This Period

7590.25

Payment This Period

7590.25

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

1299.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 94 / 95

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
CONSOLIDATED MAILING SERVICESNature of Debt (Purpose):  
DIRECT MAIL - PRINTINGMailing Address 504 SHAW RD  
SUITE 206City State ZIP Code  
STERLING VA 20166

Outstanding Balance Beginning This Period

1784.25

Transaction ID: SD10.44276

Amount Incurred This Period

47752.58

Payment This Period

49536.83

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
INTEGRAMNature of Debt (Purpose):  
DIRECT MAIL - PRINTING

Mailing Address 8421 HILLTOP RD

City State ZIP Code  
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.76915

Amount Incurred This Period

14668.78

Payment This Period

14668.78

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LEGACY LISTS, INC.Nature of Debt (Purpose):  
LIST RENTALSMailing Address 1155 15TH STREET, NW  
SUITE 410City State ZIP Code  
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

6675.61

Transaction ID: SD10.44277

Amount Incurred This Period

0.00

Payment This Period

4382.20

Outstanding Balance at Close of This Period

2293.41

1) **SUBTOTALS** This Period This Page (optional).....

2293.41

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 95 / 95

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10NAME OF COMMITTEE (In Full)  
FREEDOM'S DEFENSE FUND**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
PATTON-KIEHL GROUP, INC.Nature of Debt (Purpose):  
DIRECT MAIL - MAILSHOP

Mailing Address PO BOX 590

City State ZIP Code  
THORNBURG VA 22565

Outstanding Balance Beginning This Period

3499.09

Transaction ID: SD10.44280

Amount Incurred This Period

29113.45

Payment This Period

32612.54

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WASHINGTON INTELLIGENCE BUREAUNature of Debt (Purpose):  
CAGING & ESCROW SERVICES

Mailing Address 4128 PEPSI PLACE

City State ZIP Code  
CHANTILLY VA 20151

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.76879

Amount Incurred This Period

9237.87

Payment This Period

9237.87

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WEST END PRINTING CO.Nature of Debt (Purpose):  
DIRECT MAIL - PRINTING

Mailing Address 1609 SHERWOOD AVE

City State ZIP Code  
RICHMOND VA 23220

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.76881

Amount Incurred This Period

17629.50

Payment This Period

17629.50

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

0.00

**2) TOTALS** This Period (last page this line number only).....

47448.32

**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

47448.32